## BEST AVAILABLE COPY

DATENT A	APPLICATION	FEE DETERMINATION	N RECOR
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Application	þr	Docket	Number
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09 61662C	)
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Effective October 1, 2000							11	$\mathcal{Q}'$	1000	20		
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OR_	OTHER SMALL E			
TO	TAL CLAIMS							RATE	FEE		RATE	FEE
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* If	the difference in	n column 1 is	less than zer	o, ente	er "0" in c	olumn 2	L	TOTAL		OR	TOTAL	1096
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		(Column 1)		(Col	umn 2)	(Column 3)		ADDIT. 1 EE		_		
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## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE? (CALCULATION SHEET)

ADPLICATION MODES

FORM OIPE PAMPOL (Rev. 1277)

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Figure 7